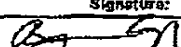


REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL <small>Subsection (b) of 35 U.S.C. §132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995. See The American Inventors Protection Act of 1999 (AIPA).</small>	Application Number	09/670,028
	Filing Date*	September 26, 2000
	First Named Inventor	Sveinn OLAFSSON
	Group Art Unit	1762
	Examiner Name	M. PADGETT
	Attorney Docket No.	OLAF3001/BEU

*File
Paid*

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.
NOTE: * Filing date must be on or after June 8, 1995; but if before May 29, 2000, then consider a CPA.

1. Please consider the following as the required submission under 37 C.F.R. §1.114:
- ☒ a. The Amendment/Reply filed on (date): Filed **HEREWITH**
 - ☐ b. The Information Disclosure Statement (IDS) filed on (date):
 - ☐ c. The arguments in the Brief/Reply Brief filed on (date):
 - ☐ d. The ___ page(s) of Form PTO-1449 and copy of each listed document filed (date):
 - ☐ e. Other:
 - ☒ 2. A 2-month Petition for Extension of Time is filed herewith.
 - ☒ 3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17 to Deposit Account No. 02-0200.
 - ☐ 4. A check in the amount of \$_____ is submitted herewith.
 - ☒ 5. This Request is transmitted by facsimile to number (703) 872-9306.
 - ☐ 6. Other:

THE RCE FEE IS CALCULATED AS FOLLOWS:				Basic Fee:	\$770.00
Total Claims:		-	(highest number previously paid for) =	X \$18 =	
Independent Claims:		-	(highest number previously paid for) =	X \$86 =	
Correspondence Address: 23364 Customer Number				Multiple Dependent Claim (add \$290.00):	
				Subtotal:	
				50% Reduction if Small Entity Status:	
Phone: 703-683-0500 Fax: 703-683-1080				Total:	\$385.00
Date:	Name:		Signature:		Reg. No.
October 29, 2003	Benjamin E. Urcia				33,805

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